Case 22-17639-VFP Doc 10 Filed 10/18/22 Entered 10/18/22 10:49:50 Desc Main Document Page 1 of 44

Fill in th	nis information to identi	fy your case:	.,	
Debtor 1	Michael Pizzuto			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, NEWARK DIVISION	
_	22-17639			
(if known)				Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you fill your original forms, you must fill out a new Summary and check the box at the top of this page.

Pa	tt 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	415,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	131,787.16
	1c. Copy line 63, Total of all property on Schedule A/B	\$	546,787.16
Pa	tt 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	383,364.83
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	8,600.91
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	20,831.74
	Your total liabilities	\$	412,797.48
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	7,309.25
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,305.25
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your oth	er sched	ules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	rsonal, fa	amily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box	and sub	omit this form to the

court with your other schedules.

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Case number (if known) 22-17639 Document

Debtor 1 Pizzuto, Michael

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

16,171.67 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,600.91
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	8,600.91

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				Doc	<u>cument</u>	Page 3 of 44	4			
F	ill in thi	s information to	identify your case	and th	is filing:					
Debtor 1		Michael Piz	zuto							
20010.		First Name		Name		Last Name				
Debtor 2 (Spouse, if fil	ling)	First Name	Middle	Name		Last Name				
United Sta	ates Ba	nkruptcy Court for	r the: DISTRICT	OF NEV	V JERSEY, NE	EWARK DIVISION				
		. ,								
Case num	nber	22-17639				-				Check if this is an amended filing
										ag
Officia	ıl Fo	rm 106A/E	3							
		e A/B: P	_							12/15
			<u> </u>	n asset	only once If a	asset fits in more th	nan one c	ategory list the	asset in the	category where you
think it fits	best. Bo	e as complete and e space is needed,	accurate as possible	. If two	married people	are filing together, be top of any additional	oth are ec	ually responsib	ole for suppl	lying correct
Part 1: D	escribe	Fach Residence B	Building Land or Oth	er Real	Estate You Ow	n or Have an Interest	In			
1. Do you d	own or h	ave any legal or ed	quitable interest in a	ny reside	ence, building, l	and, or similar prope	erty?			
□ No. G	o to Pari	2.								
Yes.	Where is	s the property?								
1.1				What		? Check all that apply				
5 Bı	uena V	ista Dr			Single-family h					ns or exemptions. Put claims on Schedule D:
		if available, or other de	escription		Duplex or mult	· ·				Secured by Property.
					Condominium	or cooperative				
					Manufactured	or mobile home		Current value	of the	Current value of the
Rin	gwood	I NJ	07456-2022		Land			entire property		portion you own?
City		State	ZIP Code		Investment pro	perty		\$415,0	00.00	\$415,000.00
					Timeshare			Describe the n	ature of you	ur ownership interest
				□ Wha	Other	in the managery? Ob-	-1	(such as fee si a life estate), it		cy by the entireties, or
				wno	Debtor 1 only	in the property? Chec	ck one	a me estatej, n	i kilowii.	
Pas	saic			_	Debtor 2 only					
Count					Debtor 1 and [Debtor 2 only				
	,					the debtors and anoth	ner	☐ Check if t		unity property
				Othe	r information yo	ou wish to add about		•	,	
					erty identification idence	on number:				
				1103						
			•	•		om Part 1, includin	-		s	\$415,000.00
you h	ave att	ached for Part 1.	Write that number	nere	•••••			=>		——————————————————————————————————————
Down Co. D		V V-b:-l								
Part 2: D	escribe	Your Vehicles								
						nether they are reg utory Contracts and			any vehicle	s you own that
3. Cars, v	ans, tru	ıcks, tractors, sp	ort utility vehicles	, motor	cycles					
■ No										
☐ Yes										

Official Form 106A/B Schedule A/B: Property page 1

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1 Pizzuto, Michael Case number (if known) 22-17639

Debtor 1	Pizzuto, Mic	hael Case num	ber (if known)	22-17639
		or homes, ATVs and other recreational vehicles, other vehicles, and access notors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	ories	
■ No				
☐ Yes				
5 Add the	e dollar value of t	the portion you own for all of your entries from Part 2, including any entries	for names	
		art 2. Write that number here=		\$0.00
Part 3: De	ooriba Vaur Baraas	nal and Household Items		
		gal or equitable interest in any of the following items?		Current value of the
-				portion you own? Do not deduct secured claims or exemptions.
	old goods and fulles: Maior appliance	rnishings es, furniture, linens, china, kitchenware		
□ No		,,,,		
Yes.	Describe	Household Furnishings		\$3.500.00
		Household Furnishings		\$3,500.00
□ No	les: Televisions an	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	; music collec	ctions; electronic devices
— 165.	Describe	TV/Cell Phone/Computer/Tablet		\$1,750.00
Exampl		igurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta emorabilia, collectibles	amp, coin, or	baseball card collections; other
		Autographed Picture of James Gandolfini		\$200.00
Exampl	ent for sports an les: Sports, photog instruments	d hobbies raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and	kayaks; carpentry tools; musical
_ 100.	20001130	Guitars		\$500.00
		Amps for Guitars		\$150.00
		Pelaton Bike		\$1,700.00
		Gym Equipment		\$200.00
		Piano		\$250.00
■ No □ Yes. 11. Clothe Examp	ples: Pistols, rifles Describe	, shotguns, ammunition, and related equipment hes, furs, leather coats, designer wear, shoes, accessories		

Official Form 106A/B Schedule A/B: Property page 2

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De	btor 1	Pizzuto, Mic	chael		Case number (if known)	wn) 22-17639	
			Ordin	ary Clothing			\$750.00
	□ No Î		welry, cost		rings, wedding rings, heirloom je	ewelry, watches, gems, gold,	silver
	Exam _l □ No □	orm animals ples: Dogs, cats, Describe		ses s 1 Bird			\$0.00
	■ No □ Yes.	Give specific info	ormation		ready list, including any health	·	\$9,500.00
		escribe Your Finan wn or have any I		s quitable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No		•	ur wallet, in your home, in a	safe deposit box, and on hand w	when you file your petition	
		-	-		ertificates of deposit; shares in che same institution, list each.	credit unions, brokerage hous	es, and other similar
	Yes.				Institution name:		
			17.1.	Checking Account	Bank of America		\$0.00
			17.2.	Checking Account	Chase Bank		\$50.00
	Exam _l ■ No	, mutual funds, o ples: Bond funds,			firms, money market accounts		
		ublicly traded st venture	ock and i	nterests in incorporated	and unincorporated business	ses, including an interest i	n an LLC, partnership, and
		Give specific inf		about them me of entity:		% of ownership:	
20.	Negot	iable instruments	include p	ersonal checks, cashiers' c	and non-negotiable instrumer hecks, promissory notes, and m someone by signing or deliverin	oney orders.	

■ No

page 3

Filed 10/18/22 Entered 10/18/22 10:49:50 Case 22-17639-VFP Doc 10 Page 6 of 44 Document Debtor 1 Case number (if known) Pizzuto, Michael ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401(k) or Similar Plan RFS Commerical, Inc. Retirement Services \$122,237.16 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits;

unpaid loans you made to someone else

■ No

☐ Yes. Give specific information...

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

■ No

Case 22-17639-VFP Doc 10 Filed 10/18/22 Entered 10/18/22 10:49:50 Document Page 7 of 44 Debtor 1 Case number (if known) Pizzuto, Michael 22-17639 ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for \$122,287.16 Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

Official Form 106A/B Schedule A/B: Property page 5

\$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

☐ Yes. Give specific information.......

Deb	tor 1 Pizzuto, Michael			Case number (if known)	22-17639	
Part	8: List the Totals of Each Part of this Form					
55.	Part 1: Total real estate, line 2					\$415,000.00
56.	Part 2: Total vehicles, line 5		\$0.00			<u>. </u>
57.	Part 3: Total personal and household items, line 15	\$9,5	00.00			
58.	Part 4: Total financial assets, line 36	\$122,2	87.16			
59.	Part 5: Total business-related property, line 45		\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00			
61.	Part 7: Total other property not listed, line 54	+	\$0.00			
62.	Total personal property. Add lines 56 through 61	\$131,7	<u>87.16</u>	Copy personal property to	tal	\$131,787.16
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$	546,787.16

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this	information to identif	y your case:		
Debtor 1	Michael Pizzuto			
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, NEWARK DIVISION	
	2-17639			
(if known)				☐ Check i
				amende

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as I	Exempt									
1.	Which set of exemptions are you claiming	? Check one only, even	if you	r spouse is filing with you.							
	☐ You are claiming state and federal nonbank										
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	5 Buena Vista Dr	\$415,000.00	•	\$27,900.00	11 USC § 522(d)(1)						
	Ringwood NJ, 07456-2022 County: Passaic Residence Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit							
	Household Furnishings Line from Schedule A/B 6.1	\$3,500.00		\$3,500.00	11 USC § 522(d)(3)						
	Line Iron Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit							
	TV/Cell Phone/Computer/Tablet Line from Schedule A/B 7.1	\$1,750.00		\$1,750.00	11 USC § 522(d)(3)						
	Line Iron Schedule A/B. 7.1			100% of fair market value, up to any applicable statutory limit							
	Autographed Picture of James Gandolfini	\$200.00		\$200.00	11 USC § 522(d)(3)						
	Line from Schedule A/B 8.1			100% of fair market value, up to any applicable statutory limit							
	Guitars	\$500.00		\$500.00	11 USC § 522(d)(3)						
	Line from Schedule A/B. 9.1			100% of fair market value, up to any applicable statutory limit							

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De	btor 1 Pizzuto, Michael			Case number (if known)	22-17639
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Amps for Guitars Line from Schedule A/B 9.2	\$150.00		\$150.00	11 USC § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Pelaton Bike Line from Schedule A/B 9.3	\$1,700.00		\$1,700.00	11 USC § 522(d)(3)
	Ellie IIolii Sonedale 702 G.G			100% of fair market value, up to any applicable statutory limit	
	Gym Equipment Line from Schedule A/B 9.4	\$200.00		\$200.00	11 USC § 522(d)(3)
	2110 110111 307,1000110 7 1 2 3 1 1			100% of fair market value, up to any applicable statutory limit	
	Piano Line from Schedule A/B 9.5	\$250.00		\$250.00	11 USC § 522(d)(3)
	Line Holl Schedule A/L 3.3			100% of fair market value, up to any applicable statutory limit	
	Ordinary Clothing Line from Schedule A/B 11.1	\$750.00		\$750.00	11 USC § 522(d)(3)
	Line nom concease / VZ TTT			100% of fair market value, up to any applicable statutory limit	
	Watch/Ring Line from Schedule A/B: 12.1	\$500.00		\$500.00	11 USC § 522(d)(4)
	Line Holli Schedule A/L 12.1			100% of fair market value, up to any applicable statutory limit	
	Chase Bank Line from Schedule A/B 17.2	\$50.00		\$50.00	11 USC § 522(d)(5)
	Elle Holli Genedale A/L 11.2			100% of fair market value, up to any applicable statutory limit	
	RFS Commerical, Inc. Retirement Services	\$122,237.16		\$122,237.16	11 USC § 522(d)(12)
	Line from Schedule A/B 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3			I on or after the date of adjustment.)	
	NoYes. Did you acquire the property covered	hy the exemption within	n 1 21	5 days hefore you filed this case?	
	No	2 Sy the exemption within	,∠.	o dayo bororo you mou uno odoc:	
	☐ Yes				

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			Document	Page 1	.1 of 44		
	Fill in this i	information to ident	ify your case:				
Debto	or 1	Michael Pizzuto					
Depil	וו	First Name	Middle Name	Last Name		- \	
Debto	or 2						
(Spous	e if, filing)	First Name	Middle Name	Last Name		_	
Unite	d States Bank	ruptcy Court for the:	DISTRICT OF NEW JERSEY	, NEWARK D	DIVISION	_	
Case	number 22	2-17639					
(if knov						☐ Check	if this is an
						amend	led filing
Ott:	sial Farms	10CD					
	cial Form						
Sch	nedule D): Creditors	Who Have Claims	Secure	ed by Propert	y	12/15
	d, copy the Add		f two married people are filing togetl , number the entries, and attach it to				
1. Do a	ny creditors ha	ave claims secured by	your property?				
	No. Check th	nis box and submit thi	s form to the court with your other s	schedules. Yo	ou have nothing else to re	eport on this form.	
	Yes. Fill in al	Il of the information be	elow.				
Part '	1 List ΔII S	Secured Claims					
			nore than one secured claim, list the cre	aditar aanarata	Column A	Column B	Column C
			a particular claim, list the other creditor			Value of collateral	Unsecured
much	as possible, list	the claims in alphabetic	al order according to the creditor 's na	me.	Do not deduct the value of collateral.	that supports this claim	portion If any
	Shellpoint I	Mortgage			value of collateral.		•
2.1	Servicing		Describe the property that secures	the claim:	\$383,364.83	\$415,000.00	\$0.00
	Creditor's Name		Mortgage on Residence				
	DO D 400						
	PO Box 108		As of the date you file, the claim is	: Check all that			
	Greenville, 29603-0826		apply. Contingent				
-		ity, State & Zip Code	☐ Unliquidated				
	Number, Street, C	ity, State & Zip Code	☐ Disputed				
Who	owes the debt	? Check one.	Nature of lien. Check all that apply.				
■ De	btor 1 only		☐ An agreement you made (such as	mortgage or s	secured		
_	btor 2 only		car loan)				
_	btor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At	least one of the	debtors and another	☐ Judgment lien from a lawsuit	,			
_	eck if this clair		☐ Other (including a right to offset)				
C	ommunity debt						
Date o	debt was incurr	red	Last 4 digits of account nun	nber 4867	7		
		-	<u> </u>		<u> </u>		
Add t	he dollar value	of your entries in Colo	umn A on this page. Write that numb	er here:	\$383,36	4.83	
	is the last page that number he		e dollar value totals from all pages.		\$383,36	4.83	
WILLE	that humber he	si c .					
Part 2	List Othe	rs to Be Notified for	a Debt That You Already Listed				
trying than o	to collect from	you for a debt you ov	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the addition s page.	in Part 1, and	then list the collection a	gency here. Similarly, if y	ou have more
[]		per, Street, City, State &	Zip Code	On w	hich line in Part 1 did you	enter the creditor? 2.1	
	KML Law 216 Hadd	Group on Ave Ste 406		l ast	4 digits of account number	4867	
		J 7.1.5 JIG 400		Lust	. a.g.to or account number		

Westmont, NJ 08108-2812

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Debtor	Michael Pizzuto			Case number (f known)	22-17639	
	First Name	Middle Name	Last Name			
	Name, Number, Street, Cit Shellpoint 55 Beattie PI Ste 60 Greenville, SC 2960	00		On which line in Part 1 did you enter Last 4 digits of account number 48		

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heck if this is an
mended filing
12/15
s. List the other party to
I Form 106A/B) and on hat are listed in Schedul
boxes on the left. Attach
write your name and
For each claim listed,
nounts. As much as
nounts. As much as Continuation Page of Part
nounts. As much as
nounts. As much as Continuation Page of Part Nonpriority amount
nounts. As much as Continuation Page of Part Nonpriority
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nounts. As much as Continuation Page of Part Nonpriority amount
nounts. As much as Continuation Page of Part Nonpriority amount
nounts. As much as Continuation Page of Part Nonpriority amount
s. I F

Total claim

2.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part

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1 Pizzuto Michael Case number (f known) 22-17639

Debio	Pizzuto, Michael	Case number (r known) <u>22-1/639</u>	
4.1	Borough of Ringwood	Last 4 digits of account number 1430	\$854.50
	Nonpriority Creditor's Name	When was the debt incurred?	
	609 Margaret King Ave Ringwood, NJ 07456		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Delinquent Water Bill	
	IRS - Centralized Insolvency		
4.2	Operations	Last 4 digits of account number	\$4,315.75
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 7346		
	Philadelphia, PA 19101-7346	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	Other. Specify 2017 Federal Taxes Due	
4.3	Kohls/Capital One	Last 4 digits of account number 5076	\$2,998.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 3115		
	Milwaukee, WI 53201-3115		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Credit Card Purchases	

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Debto	r1 Pizzuto, Michael	Case number (f known) 22-17639	
4.4	Macys/DSNB	Last 4 digits of account number xx02	\$3,953.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 8218 Mason, OH 45040-8218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Пол	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Credit Card Purchases	
4.5	Orange & Rockland Electric	Last 4 digits of account number 5005	\$3,762.22
	Nonpriority Creditor's Name	When was the debt incurred?	
	390 W Route 59	Their was the dest medical.	
	Spring Valley, NY 10977-5320 Number Street City State Zip Code		
		As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility Bill	
4.6	PSE&G - Bankruptcy Dept.	Last 4 digits of account number 2209	\$4,948.27
	Nonpriority Creditor's Name	When we the debt in some 40	<u> </u>
	PO Box 709	When was the debt incurred?	
	Newark, NJ 07101-0709		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Utility Bill	

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Debtor 1	Pizzu	to, N	/lichael		С	Case nu	ımber (if known)	22-17639	
	Synchrony Bank Nonpriority Creditor's Name			Last 4 digits of account number	er -			-	unknown
	c/o PRA	Re	ceivables Management	When was the debt incurred?	-				
	PO Box Norfolk)21 23541-1021						
Number Street City State Zip Code Who incurred the debt? Check one.			City State Zip Code	As of the date you file, the claim	m is:	: Check	all that apply		
Debtor 1 only				Пол					
	■ Debtor		•	☐ Contingent					
	_		y I Debtor 2 only	☐ Unliquidated☐ Disputed					
			of the debtors and another	Type of NONPRIORITY unsecu	red o	claim:			
			s claim is for a community	☐ Student loans					
	debt		oject to offset?	Obligations arising out of a se report as priority claims	epara	ation agr	reement or divorce	that you did not	
	■ No			Debts to pension or profit-sha	aring	plans, a	and other similar de	ebts	
	☐ Yes			Other. Specify Credit Ca	ard	Purch	nases		
Part 3:	List Ot	hers	to Be Notified About a Debt	That You Already Listed					
				out your bankruptcy, for a debt that	t you	ı alread	y listed in Parts 1	or 2. For example	, if a collection agency
is tryin have m	g to collect	ct from	m you for a debt you owe to son	neone else, list the original creditor you listed in Parts 1 or 2, list the ad	in P	arts 1 o	r 2, then list the c	collection agency h	ere. Similarly, if you
	d Address			On which entry in Part 1 or Part 2 did y			•		
			Services Dr Ste 400	Line 4.4 of (Check one):	e 4.4 of (Check one):				
	la, NY 10					Part 2: C	Creditors with Nonp	oriority Unsecured C	laims
				ast 4 digits of account number		XX	:02		
	d Address 3-Legal			On which entry in Part 1 or Part 2 did y Line 4.6 of (<i>Check one</i>):			•	it . I la	
	k Plz # 1	Γ5D	L	ine <u>4.0</u> or (Check one).				ity Unsecured Claim	
Newar	k, NJ 07	102		Part 2: Creditors with Nonpriority Unsecured Claims					iaiiiis
				_ast 4 digits of account number		22	209		
Part 4:	Add th	e An	nounts for Each Type of Uns	secured Claim					
	he amount unsecure			ns. This information is for statistica	ıl rep	orting p	purposes only. 28	3 U.S.C. §159. Add	the amounts for each
							Total	Claim	
Total cla	ime	6a.	Domestic support obligations			6a.	\$	0.00	
from Par		6b.	Taxes and certain other debts	you owe the government		6b.	\$	8,600.91	
		6c.	=	njury while you were intoxicated		6c.	\$	0.00	
		6d.	Other. Add all other priority unse	ecured claims. Write that amount here.		6d.	\$	0.00	
		6e.	Total Priority. Add lines 6a thro	ugh 6d.		6e.	\$	8,600.91	\neg
							T. (.)		
Total cla	ime	6f.	Student loans			6f.	\$	0.00	
from Par		6g.	Obligations arising out of a se you did not report as priority of	paration agreement or divorce that		6g.	\$	0.00	
		6h.		ring plans, and other similar debts		6h.	\$	0.00	
		6i.	Other. Add all other nonpriority there.	unsecured claims. Write that amount		6i.	\$	20,831.74	
		6j.	Total Nonpriority. Add lines 6f t	through 6i.		6j.	\$	20,831.74	

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Fill in th	is information to identi	fy your case:	
Debtor 1	Michael Pizzuto		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Ba	inkruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, NEWARK DIVISION
_	22-17639		
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
.1		Name, Number	, Street, City, State and ZIP	Code	
	Name				_
					<u></u>
	Number	Street			
	City		State	ZIP Code	
2	Name				<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
.3	City		Glate	Zii Code	
	Name				
	Number	Street			<u> </u>
		Street			
.4	City		State	ZIP Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	nt Page 18 of	144	
Fill	in this information to identif	y your case:			
Debtor 1	Michael Pizzuto				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, NEWARK DIVISI	NC	
Casa numb	oor 22 47620				
Case numb (if known)	per 22-17639				☐ Check if this is an
					amended filing
Sched Codebtors	Form 106H ule H: Your Code are people or entities who are gether, both are equally resp	e also liable for any debt			12/15 possible. If two married people and additional Page, fill it out,
and number		the left. Attach the Addit			l Pages, write your name and
1. Do y	ou have any codebtors? (If y	ou are filing a joint case, do	o not list either spouse as	a codebtor.	
■ No					
☐ Yes					
Californ	in the last 8 years, have you nia, Idaho, Louisiana, Nevada, Go to line 3. Did your spouse, former spous	New Mexico, Puerto Rico	, Texas, Washington, and		and territories include Arizona,
line 2 a 106D), Colum	Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the creditor Schedule D, Schedule E/F,	on Schedule D (Official Forn
	lame, Number, Street, City, State and Zi	P Code		Check all schedules that	
3.1				☐ Schedule D, line	
	Name			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
_	Nhorah an Otazat				
	Number Street City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
	City	State	ZIP Code		

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		o identify your cas	se.					
Deb	otor 1	Michael Pizz						
	otor 2 ouse, if filing)							
Uni	ted States Bankrupt	tcy Court for the:	DISTRICT OF NEW J	ERSEY, NEWARK DIV	ISION			
	se number 22-	17639					ded filing nent showing postpetition	chapter 13
\bigcirc	fficial Form	1061					s of the following date:	
	chedule I: `		me			MM / DD	YYYY	12/15
supp spou attac	plying correct info use. If you are sep ch a separate shee	rmation. If you a arated and your	ole. If two married peop re married and not filing spouse is not filing with n the top of any addition	g jointly, and your spo h you, do not include i	use is living nformation a	with you, included the with your spoot your spoot with the witten with the	ude information about youse. If more space is no	your eeded,
1.	Fill in your emplo	oyment		Debtor 1		Debto	· 2 or non-filing spouse	
		If you have more than one job,		■ Employed		☐ Em	☐ Employed	
	attach a separate page with information about additional	Employment status	☐ Not employed		☐ Not	☐ Not employed		
	employers. Include part-time,		Occupation	Vice President Bu Developm	usiness			
	self-employed wor		Employer's name	RFS Commercial				
	Occupation may in homemaker, if it a		Employer's address	280 N Midland Av Saddle Brook, NJ		08		
			How long employed th	nere?				
Par	t 2: Give Det	tails About Mont	hly Income					
unle	ss you are separated	d.	e you file this form. If you than one employer, comb	Ç ,	,		,	•
•	ce, attach a separate	•			, ,	•	·	
					F	For Debtor 1	For Debtor 2 or non-filing spouse	
2.			, and commissions (before the local commissions) to the commissions (before the commission) to the commission of the commi		2. \$ _	13,563.33	\$\$N/A	<u>. </u>
3.	Estimate and list	monthly overting	ne pay.		3. +\$_	0.00	+\$ N/A	<u>.</u>
4.	Calculate gross I	ncome. Add line	2 + line 3.		4. \$_	13,563.33	\$ <u>N/A</u>	

Official Form 106l Schedule I: Your Income page 1

Debtor	Pizzuto, Michael	_	Case	number (if known)	22-17639		
C	Copy line 4 here	4.	For	Debtor 1 13,563.33	For Debtor non-filing s		
	opy line 4 here		Ψ-	13,303.33	<u> </u>	IVA	
5. L	ist all payroll deductions:						
5	a. Tax, Medicare, and Social Security deductions	5a.	\$_	4,112.72	\$	N/A	
5	b. Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	c. Voluntary contributions for retirement plans	5c.	\$_	678.17	\$	N/A	
_	d. Required repayments of retirement fund loans	5d.	\$_	947.61	\$	N/A	
	e. Insurance	5e.	\$_	0.00	\$	N/A	
5		5f. 5g.	\$ \$	0.00	\$	N/A	
	g. Union dues h. Other deductions. Specify: POP EE PreTax	5g. 5h.+	· —	0.00 475.84	+ \$	N/A N/A	
J	Pretax Dental	— ^{311.‡}	\$_	39.74	\$	N/A	
c A			· -		· ———		
	.dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ <u> </u>	6,254.08	\$	N/A	
7. C	calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	7,309.25	\$	N/A	
	ist all other income regularly received: a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
8	b. Interest and dividends	8b.	<u> </u>	0.00	\$	N/A	
8	c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
8	d. Unemployment compensation	8d.	<u> </u>	0.00	\$	N/A	
_	e. Social Security	8e.	<u> </u>	0.00	\$	N/A	
8	f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
8	g. Pension or retirement income	8g.	\$	0.00	\$	N/A	
8	h. Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9. A	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
	calculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$,	7,309.25 + \$	N/A	= \$ 7,309.	25
Ir o D	state all other regular contributions to the expenses that you list in Schedule and the contributions from an unmarried partner, members of your household, your determined or relatives. The continuity of the contributed any amounts already included in lines 2-10 or amounts that are not available:	ependent				+\$0.	00
	add the amount in the last column of line 10 to the amount in line 11. The resulting that amount on the Summary of Schedules and Statistical Summary of Certain					\$ 7,309.5	25
40 =		_				monthly incom	е
13. D	lo you expect an increase or decrease within the year after you file this form? ■ No.	ſ					
-							\neg

Fill	in this information to identify your case:			
Deb	otor 1 Michael Pizzuto		Check if this is:	
Deh	tor 2	-	An amended filingA supplement show	ving postpetition chapter 13
	ouse, if filing)		expenses as of the	
Unit	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, NEDIVISION	WARK	MM / DD / YYYY	
1	e number 22-17639 nown)			
0	fficial Form 106J			
S	chedule J: Your Expenses			12/1
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo known). Answer every question.			
Par	t 1: Describe Your Household			
1.	Is this a joint case?			
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?			
	□ No			
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses f	or Separate Householdof De	btor 2.	
2.	Do you have dependents? ■ No			
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.			☐ Yes ☐ No
				☐ Yes
				□ No
				Yes
				□ No
3.	Do your expenses include ■ No.	=		☐ Yes
Ο.	expenses of people other than yourself and your dependents?			
Par				
exp	imate your expenses as of your bankruptcy filing date unless yo enses as of a date after the bankruptcy is filed. If this is a supple blicable date.			
	lude expenses paid for with non-cash government assistance if)			
	ue of such assistance and have included it on Schedule I: Your II ficial Form 106I.)	ncome	Your exp	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	. \$	2,885.25
	If not included in line 4:			
	4a. Real estate taxes	4a	ı. \$	0.00
	4b. Property, homeowner's, or renter's insurance	45	o. \$	0.00
	4c. Home maintenance, repair, and upkeep expenses		. \$	200.00
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hom		l. \$ \$	0.00

Deb	tor 1 Pizzuto, Michael	Case number (if known)	22-17639
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	325.00
	6b. Water, sewer, garbage collection	6b. \$	20.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	175.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	950.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	150.00
10.	Personal care products and services	10. \$	125.00
11.	Medical and dental expenses	11. \$	100.00
12.	Transportation. Include gas, maintenance, bus or train fare.		
	Do not include car payments.	12. \$	175.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
14.	Charitable contributions and religious donations	14. \$	50.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	0.00
	15d. Other insurance. Specify:	15d. \$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16. \$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	
	• •	·	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as	18. \$	0.00
10	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). Other payments you make to support others who do not live with you.	\$	0.00
10.	Specify:	19.	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sched		
_0.	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21		21. +\$	
۷۱.	Other: Specify: Pet Care	Z1. +\$	150.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	5,305.25
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,305.25
23.	Calculate your monthly net income.	00- *	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	7,309.25
	23b. Copy your monthly expenses from line 22c above.	23b\$	5,305.25
	23c. Subtract your monthly expenses from your monthly income.		
	The result is your monthly net income.	23c. \$	2,004.00
24.	For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No.		rease or decrease because of a
	Yes. Explain here:		

Schedule J: Your Expenses

page 2

Official Form 106J

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Fill in this in	formation to identify yo	our case:			
Debtor 1	Michael Pizzuto				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF NEW	JERSEY, NEWARK DIVIS	SION	
Case number (if known)	22-17639				☐ Check if this is an amended filing
Official Forn	n 106Dec				
		an Individua	al Debtor's S	Schedules	12/15
obtaining money years, or both. 18		connection with a bar			nent, concealing property, or , or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
•	ty of perjury, I declare to true and correct.	that I have read the sur	mmary and schedules fil	ed with this declaration	and
X /s/ Micl	hael Pizzuto		X		
Michae	el Pizzuto e of Debtor 1		Signature	of Debtor 2	

Date October 18, 2022

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	Fill in thi	is information to identi	ify your case:			
_						
Det	otor 1	Michael Pizzuto First Name	Middle Name	Last Name		
Deb	otor 2					
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY, NEWARK DIVISION		
Cas	se number	22-17639				
(if kn	own)				-	
					a	mended filing
Sta	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
			attach a separate sheet to the	nis form. On the top of any	additional pages, write your r	name and case number
Par	t 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	ır current marital statu	s?			
	☐ Married	d				
	■ Not ma	rried				
2.	During the I	ast 3 years, have you	lived anywhere other than v	where you live now?		
	-					
	_	st all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now		
		or an or the places you in				
	Debtor 1:		Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	
	VAVIALLE SERVER ALL OF L			-1		
s. state				-		
	_					,
	_	alsa assaa ssass fill asst Cab	antida III. Varim Cantabiana (Offi	-i-l F 40CH)		
	☐ Yes. IVI	ake sure you fill out Sch	aule H: Your Codeptors (Office	ciai Form 106H).		
Par	t 2 Expla	in the Sources of You	r Income			
_	D'.l					
4.						ar years?
	If you are filing	ng a joint case and you h	ave income that you receive to	gether, list it only once under	Debtor 1.	
	□ No					
	Yes. Fi	II in the details.				
Debtor 2 (Spouse & filting) First Name United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY, NEWARK DIVISION Case number (Intervent) Case number 22-17639 Check if this is an amended filting Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 04/2 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married During the last 3 years, have you lived anywhere other than where you live now? Poebtor 1: Dates Debtor 1 lived pebtor 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Explain the Sources of Your Income If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
				Gross income		Gross income
				exclusions)		and exclusions)
		-	■ Wages, commissions.	\$144,193.00	☐ Wages, commissions,	
(Ja	nuary 1 to D	ecember 31, 2021)	_		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Page 25 of 44 Document Case number (if known) 22-17639 Debtor 1 Pizzuto, Michael Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$161,704.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year: \$170,269.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

☐ Yes. List all payments to an insider.

Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid

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8.	Within 1 year before you filed for bankrupton insider? Include payments on debts guaranteed or cosign		nents or transfer an	y property	on account of a del	ot that benefited an	
	-						
	No☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount	Amount	you Peason for	this payment	
	insider 5 Name and Address	bates of payment	paid	still			
Par	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures					
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury ca and contract disputes.						
	□ No						
	Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of th	e case	
	NewRez, LLC dba Shellpoint Mortgage Services F-014078-18	e Services Co 3-18 77		Chancery Division, Passaic County 77 Hamilton St Paterson, NJ 07505-2018		■ Pending□ On appeal□ Concluded	
					Sale Sche	duled	
	■ No. Go to line 11. □ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property			Date	Value of the property	
		Explain what happened				p. 5p	
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment becar ■ No □ Yes. Fill in the details.		uding a bank or fina	incial institu	ıtion, set off any an	ounts from your	
	Creditor Name and Address	Describe the action the	creditor took		Date action was taken	Amount	
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an		rty in the possessio	on of an assi	ignee for the benefi	t of creditors, a	
	■ No □ Yes						
Par	t 5: List Certain Gifts and Contributions						

13.	Within 2 years before you filed for bankrupt	cy, did you give any gifts	s with a total value o	r more than	1 \$600 per person?		
	Yes. Fill in the details for each gift.				_		
	Gifts with a total value of more than \$600 person	er Describe the gifts			Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:						

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14.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or co			s with a total v	value of more than \$	600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did yo	ou lose anyth	ing because of theft	, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the load the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: F	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	S		,		
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition pro No Yes. Fill in the details.	reparin	g a bankruptcy petition?	. ,	, , ,	ty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
	Norgaard, O'Boyle & Hannon 184 Grand Ave Englewood, NJ 07631-3578		Attorney Fee		9/27/2022	\$3,687.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that y	litors or	to make payments to your creditors'		transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankri transferred in the ordinary course of you Include both outright transfers and transfers gifts and transfers that you have already liste	r busine made as	ess or financial affairs? s security (such as the granting of a secu			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Debtor 1 Pizzuto, Michael

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	beneficiary? (These are often called asset-proNoYes. Fill in the details.	tection devices.)					
	Name of trust	Description and	l value of the pro	operty trans	ferred	Date Transfer was made	
Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and Ste	orage Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	or other financial accou	unts; certificates	of deposit;		, ,	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables? No Yes. Fill in the details.	year before you filed fo	or bankruptcy, a	ny safe dep	osit box or other depos	sitory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Number and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City, State		the contents	Do you still have it?	
Pai	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so someone.	meone else owns? Inc	lude any proper	ty you borro	owed from, are storing	for, or hold in trust for	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pr (Number, Street, Cit Code)		Describe	the property	Value	
Dai	t 10: Give Details About Environmental Info	ormation					

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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24.	Has any governmental unit no	tified you that you may	be liable or potentially liable	under or in violation o	of an environment	al law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, Stat	e and ZIP Code) Add	iress (Number, Street, City, State and		aw, if you	Date of notice
25.	Have you notified any govern	mental unit of any releas	se of hazardous material?			
	■ No □ Yes. Fill in the details.	Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) It in the details. The Code of Address (Number, Street, City, State and ZIP Code) Details About Your Business or Connections to Any Business are before you filed for bankruptcy, did you own a business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or state and zip Code) Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business or have any of the following connections to any business? Details About Your Business or Connections to Any Business Benployer Identification number Do not include Social Security number or ITIN. Dates business existed The Address (Number, Street, City, State and ZiP Code) Date Issued Date Issued Date Issued Date Issued Date Issued				
	Name of site Address (Number, Street, City, State	e and ZIP Code) Add	iress (Number, Street, City, State and		aw, if you	Date of notice
26.	Have you been a party in any	judicial or administrative	e proceeding under any envir	onmental law? Includ	e settlements and	l orders.
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Nan Add	ne Iress (Number, Street, City, State	Nature of the case		Status of the case
Pai	rt 11: Give Details About You		,			
	☐ A member of a limited ☐ A partner in a partners ☐ An officer, director, or ☐ An owner of at least 5 ☐ No. None of the above ap ☐ Yes. Check all that apply Business Name Address	liability company (LLC) ship managing executive of % of the voting or equity plies. Go to Part 12. above and fill in the deta	or limited liability partnerships a corporation securities of a corporation ails below for each business.	p (LLP) Employer Ident	ification number	umber or ITIN.
	(Number, Street, City, State and ZIP Co	Name of	accountant or bookkeeper	Dates business	existed	
28.	institutions, creditors, or othe	r parties.	u give a financial statement to	o anyone about your b	ousiness? Include	e all financial
	☐ Yes. Fill in the details bel Name Address (Number, Street, City, State and ZIP C	Date Iss	ued			
Pai	rt 12: Sign Below					
true ban	and correct. I understand that	making a false statement up to \$250,000, or impr	it, concealing property, or ob	taining money or prop		
	Michael Pizzuto		Signature of Debtor 2			
	cnael Pizzuto gnature of Debtor 1		Signature of Deptor 2			
Dat	te October 18, 2022		Date			
~		.				_

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Debtor 1	Pizzuto, Michael	Case number (if known)	22-17639
_ ′	ttach additional pages to Your Statement of Financia	I Affairs for Individuals Filing for Bankruptcy (Off	icial Form 107)?
■ No □ Yes			
Did you pa	ay or agree to pay someone who is not an attorney to	help you fill out bankruptcy forms?	
No			
🛘 Yes. Na	ame of Person Attach the Bankruptcy Petition Pr	eparer's Notice, Declaration, and Signature (Official F	Form 119).

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Fill in this info	rmation to identify you	r case:	
Debtor 1	Michael Pizzuto		
Debtor 2 (Spouse, if filing	<u>1)</u>		
United States B	ankruptcy Court for the:	District of New Jersey, Newark Division	
Case number (if known)	22-17639		☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/22

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122G-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1 Living 0 Housing

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

5. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

785.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Debtor 1 Pizzuto, Michael Case number (if known) 22-17639

	who are under 65 years of age				
7a	. Out-of-pocket health care allowance per person	\$ 75			
7b		X1			
7c	. Subtotal. Multiply line 7a by line 7b.	\$75.00	Copy here=>	\$ 75.00	
eople	who are 65 years of age or older				
7d	. Out-of-pocket health care allowance per person	\$153_			
7e	. Number of people who are 65 or older	x <u> </u>			
7 f.	Subtotal. Multiply line 7d by line 7e.	\$	Copy here=>	\$	
7 g	. Total. Add line 7c and line 7f	\$_	75.00	Copy total here=	\$
ocal S	tandards You must use the IRS Local Standards	to answer the questions	in lines 8-15.		
	on information from the IRS, the U.S. Trustee Pro es into two parts:	gram has divided the IR	RS Local Standard fo	or housing for bank	ruptcy
	•				
_	sing and utilities - Insurance and operating exper	1Ses			
	sing and utilities - Mortgage or rent expenses wer the questions in lines 8-9, use the U.S. Truste	e Program chart. To fin	d the chart go onlin	na usina tha link sne	acified in the senara
		e i rogiani chart. To mi			
	tions for this form. This chart may also be availal		erk's office.		comed in the separa
	ousing and utilities - Insurance and operating exp	enses: Using the number	erk's office.		·
the	ousing and utilities - Insurance and operating expected amount listed for your county for insurance and	enses: Using the number	erk's office.	ed in line 5, fill in	•
the . Ho	evising and utilities - Insurance and operating expectable dollar amount listed for your county for insurance and outilities - Mortgage or rent expenses: Using the number of people you entered in line 5,	enses: Using the number doperating expenses. fill in the dollar amount	erk's office.	ed in line 5, fill in	·
the . Ho 9a	e dollar amount listed for your county for insurance and operating expeted dollar amount listed for your county for insurance and operating and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.	enses: Using the number d operating expenses. fill in the dollar amount s.	erk's office. r of people you enter	ed in line 5, fill in	·
the . Ho 9a	evising and utilities - Insurance and operating expectable dollar amount listed for your county for insurance and outilities - Mortgage or rent expenses: Using the number of people you entered in line 5,	enses: Using the number doperating expenses. fill in the dollar amount s. nd other debts secured by add all amounts that are	erk's office. r of people you enter	ed in line 5, fill in	•
the . Ho 9a	cusing and utilities - Insurance and operating expeted dollar amount listed for your county for insurance and cusing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, a contractually due to each secured creditor in the 60.	enses: Using the number doperating expenses. fill in the dollar amount s. nd other debts secured by add all amounts that are	erk's office. It of people you entered It your home.	ed in line 5, fill in	625.00
the . Ho 9a	cusing and utilities - Insurance and operating expeted dollar amount listed for your county for insurance and cusing and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, a contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.	enses: Using the number of operating expenses. If ill in the dollar amount s. Ind other debts secured by add all amounts that are of months after you file for	erk's office. r of people you entered y your home.	ed in line 5, fill in	·
the . Ho 9a	cusing and utilities - Insurance and operating expeted dollar amount listed for your county for insurance and operating and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses: Total average monthly payment for all mortgages at To calculate the total average monthly payment, a contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.	enses: Using the number of operating expenses. If fill in the dollar amount st. Ind other debts secured by add all amounts that are of months after you file for Average month payment \$ 2,341	erk's office. It of people you entered It your home. Copy	ed in line 5, fill in	625.00
the . Ho 9a	cusing and utilities - Insurance and operating expeted dollar amount listed for your county for insurance and object and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, a contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60. Name of the creditor Shellpoint Mortgage Servicing	enses: Using the number of operating expenses. If fill in the dollar amount st. Ind other debts secured by add all amounts that are of months after you file for Average month payment \$ 2,341	erk's office. It of people you entered It your home. Copy	ed in line 5, fill in \$	625.00
the Ho 9a 9b	cusing and utilities - Insurance and operating expeted dollar amount listed for your county for insurance and object and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, a contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60. Name of the creditor Shellpoint Mortgage Servicing	enses: Using the number of operating expenses. If fill in the dollar amount is. Ind other debts secured by add all amounts that are in months after you file for in a companyment in a companym	r of people you entered your home. Solution of people you entered your home. Copy here=>	ed in line 5, fill in \$	Repeat this amount on line 33a.
9a 9b 9c 0. If y	contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60. Name of the creditor Shellpoint Mortgage Servicing 9b. Total average monthly payment. Shellpoint Mortgage Servicing 9b. Total average monthly payment. Shellpoint Mortgage Servicing	enses: Using the number of operating expenses. If ill in the dollar amount so the control of the debts secured by add all amounts that are companied ment after you file for the control of the IRS Local Standard operating the control operation of the IRS Local Standard operating the control operation of the IRS Local Standard operating the control operation of the IRS Local Standard operating the control operation operation of the IRS Local Standard operating the control operation operat	erk's office. It of people you entered It your home. Copy here=> -5	\$ 2,027.00 \$ 2,341.00 \$ 0.00 Copy	Repeat this amount on line 33a.

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Debtor 1	Pizzuto, Michael		Case number (if known)	22-17639	
11.	Local transportation expenses: Check the number of vehicle	es for which you claim a	n ownership or operatir	ng expense.	
	■ 0. Go to line 14.				
	☐ 1. Go to line 12.				
	2 or more. Go to line 12.				
	Vehicle operation expense: Using the IRS Local Standards expenses, fill in the Operating Costs that apply for your Censu-			im the operating \$	0.00
13.	Vehicle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.	Standards, calculate the	net ownership or lease		
	icle 1 Describe Vehicle 1:				
13a.	Ownership or leasing costs using IRS Local Standard		\$ 0.	 00	
13b.	Average monthly payment for all debts secured by Vehicle 1.			<u></u>	
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line of contractually due to each secured creditor in the 60 months aft Then divide by 60.				
	Name of each creditor for Vehicle 1	Average monthly payment			
		\$			
	Total Average Monthly Payment	\$	Copy here => -\$	0.00 Repeat this amount on line 33b.	
	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if the numbert is less than \$0), enter \$0		Copy net Vehicle 1 expense here => \$	0.00
Veh	Describe Vehicle 2:				
13d.	Ownership or leasing costs using IRS Local Standard		\$0.	00	
13e.	Average monthly payment for all debts secured by Vehicle 2. Deased vehicles.	00 not include costs for			
	Name of each creditor for Vehicle 2	Average monthly payment			
		\$	•		
	Total average monthly payment	\$	Copy here => -\$	Repeat this amount on line 33c.	
13f	Net Vehicle 2 ownership or lease expense			Copy net	
101.	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0		Vehicle 2 expense here => \$	0.00
	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of w			 II in the \$	242.00
15.	Additional public transportation expense: If you claimed 1	or more vehicles in line	e 11 and if you claim th		
	deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for Public Transportation.	u believe is the appropria	ate expense, but you ma	ay not claim \$	0.00

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Debtor 1 Pizzuto, Michael Case number (if known) 22-17639

Oth	er Necessary Expenses In addition to the expense de the following IRS categories		listed above, yo	ou are allowed your monthly expenses for		
16.	Taxes: The total monthly amount that you will actually pay self-employment taxes, social security taxes, and Medicar pay for these taxes. However, if you expect to receive a tat that number from the total monthly amount that is withheld Do not include real estate, sales, or use taxes.	re taxes. Y x refund, y	'ou may include you must divide	e the monthly amount withheld from your	\$	4,903.64
17.	Involuntary deductions: The total monthly payroll deduction union dues, and uniform costs.	ctions that	your job requii	res, such as retirement contributions,		
	Do not include amounts that are not required by your job,	such as v	oluntary 401(k)	contributions or payroll savings.	\$	1,938.43
18.	Life Insurance: The total monthly premiums that you pay together, include payments that you make for your spouse Do not include premiums for life insurance on your dependife insurance other than term.	e's term life	e insurance.	-	\$	0.00
19.	Court-ordered payments : The total monthly amount that agency, such as spousal or child support payments.	t you pay	as required by	the order of a court or administrative		
	Do not include payments on past due obligations for spo	ousal or cl	hild support. Y	ou will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for ed	ucation tha	at is either requ	uired:		
	as a condition for your job, or					
	for your physically or mentally challenged dependent c	hild if no p	oublic education	n is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for chil Do not include payments for any elementary or secondary	-	•	ng, daycare, nursery, and preschool.	\$	0.00
22.	Additional health care expenses, excluding insurance required for the health and welfare of you or your dependence savings account. Include only the amount that is more the Payments for health insurance or health savings accounts	ents and the nan the to	nat is not reimb tal entered in l	ursed by insurance or paid by a health ine 7.	\$	0.00
23.	Optional telephone and telephone services: The total you and your dependents, such as pagers, call waiting, ca service, to the extent necessary for your health and welfar is not reimbursed by your employer. Do not include payments for basic home telephone, inte expenses, such as those reported on line 5 of Official For	monthly a aller identi re or that o	imount that you fication, specia of your dependence cell phone serv	pay for telecommunication services for I long distance, or business cell phone ents or for the production of income, if it vice. Do not include self-employment	+\$	0.00
24.	Add all of the expenses allowed under the IRS expensed Add lines 6 through 23.	se allowa	ances.		\$	8,569.07
Add	itional Expense Deductions These are additional de	eductions	allowed by the	Means Test.		
	Note: Do not include a	ny expens	e allowances lis	sted in lines 6-24.		
25.	Health insurance, disability insurance, and health sa insurance, disability insurance, and health savings accoundependents.				ır	
	Health insurance	\$	0.00			
	Disability insurance	\$	0.00			
	Health savings account	+ \$	0.00	_		
	Total	\$	0.00	Copy total here=>	\$	0.00
	Do you actually spend this total amount? ☐ No. How much do you actually spend? ☐ Yes	\$				
26.	Continuing contributions to the care of household of continue to pay for the reasonable and necessary care an household or member of your immediate family who is uncontributions to an account of a qualified ABLE program.	d support able to pay	of an elderly, c y for such expe	hronically ill, or disabled member of your	\$	0.00
27.	Protection against family violence. The reasonably ne you and your family under the Family Violence Prevention					
	By law, the court must keep the nature of these expenses	confident	ial.		\$	0.00

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ebtor 1	Pizzuto, Michael	Case number (if known) 22-1763	39		
28.	Additional home energy costs. Your home	energy costs are included in your insurance and operating expenses on line	e 8.		
	If you believe that you have home energy cost then fill in the excess amount of home energy	s that are more than the home energy costs included in expenses on line 8, costs.	1		
	You must give your case trustee documentation claimed is reasonable and necessary.	on of your actual expenses, and you must show that the additional amount		\$	0.00
		en who are younger than 18. The monthly expenses (not more than ndent children who are younger than 18 years old to attend a private or pub	olic		
	You must give your case trustee documentation reasonable and necessary and not already according to the control of the control	on of your actual expenses, and you must explain why the amount claimed in counted for in lines 6-23.	is		
	* Subject to adjustment on 4/01/25, and every	3 years after that for cases begun on or after the date of adjustment.		\$	0.00
		e monthly amount by which your actual food and clothing expenses are high aces in the IRS National Standards. That amount cannot be more than 59 National Standards.			
	To find a chart showing the maximum addition this form. This chart may also be available at the state of the	nal allowance, go online using the link specified in the separate instructions he bankruptcy clerk's office.	for		
	You must show that the additional amount claim	med is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The a instruments to a religious or charitable organize	amount that you will continue to contribute in the form of cash or financial cation. 11 U.S.C. § 548(d)(3) and (4).			
	Do not include any amount more than 15% of	of your gross monthly income.	_	\$	0.00
32.	Add all of the additional expense deduction Add lines 25 through 31.	ons.	\$	\$	0.00
Dedi	ctions for Debt Payment				
Т	nd other secured debt, fill in lines 33a thro fo calculate the total average monthly payment ne 60 months after you file for bankruptcy. The Mortgages on your home	, add all amounts that are contractually due to each secured creditor in			monthly
33a.	Copy line 9b here	=>		ayment	2.341.00
JJa.	Loans on your first two vehicles		Ψ.		2,341.00
33b.	•	=>	. ¢		0.00
			· .		
33c.		=>	Ф		0.00
33d. Name	List other secured debts e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance?			
		□ No			
	-NONE-	Yes	\$		
		□ No			
		Yes	\$		
		□ No			
		☐ Yes +	\$		
))		
33e.	Total average monthly payment. Add lines	2341 00 tot	ppy tal ere=>	\$	2,341.00

ebtor 1	Pizz	uto, Michael			Ca	ase n	umber (if known) 2	2-17639)	
			e 33 secured by your priman support or the support of yo			, or				
	No.	Go to line 35.								
	Yes.	-	must pay to a creditor, in add of your property (called the <i>cu</i> below.				in			
Nam	e of the	creditor	Identify property that secure	s the d	ebt	To	otal cure amount		Monthly	
She	ellpoin	t Mortgage Servicing	Residence		5	\$	135,156.60	÷ 60 = \$	\$	2,252.61
						\$ _		÷ 60 = 3	\$	
					9	\$ _		÷ 60 = +	\$	
						Ē		Cop	•	
					Tota	1 \$	2,252.61	total	•	2,252.61
2F D			ah ao a mriarity tay ahild a		ar alimanı dh					
			ich as a priority tax, child s your bankruptcy case? 11			ıat				
	No.	Go to line 36.								
	Yes.	Fill in the total amount of all priority claims, such as those	l of these priority claims. Do note you listed in line 19.	not incl	ude current or or	ngoi	ng			
		Total amount of all past-d	ue priority claims			\$	8,601.00	<u> </u>	0 \$_	143.35
36. P	rojecte	d monthly Chapter 13 plan	payment			\$	2,865.64	ı		
O E Te	Office of xecutive o find a l	the United States Courts (for e Office for United States Tru- ist of district multipliers that inclu	tated on the list issued by the districts in Alabama and No stees (for all other districts). des your district, go online using may also be available at the ban	rth Car	olina) or by the specified in the	X	7.80	_		
A	verage	monthly administrative expens	se				\$223.52	Copy to		223.52
37.	Add all	of the deductions for debt	payment. Add lines 33e thro	ugh 36	i.				\$	4,960.48
Total	Deduc	tions from Income								
38. A	dd all d	of the allowed deductions.								
		ne 24,All of the expenses allo e allowances	wed under IRS	\$_	8,569.0	7_				
	Copy lir	ne 32, All of the additional exp	ense deductions	\$_	0.0	0				
	Copy lir	ne 37, All of the deductions fo	r debt payment	+\$_	4,960.4	8_	٦			
	Total de	eductions		\$_	13,529.5	5	Copy total here=	:>	\$	13,529.55

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Debtor 1	Pizzuto, Micha	el		Ca	se numl	per (if known)	22-1763	39	
Part 2:	Determine You	r Disposable Income Under 11 U.S.	.C. § 1325(b)(2)						
		ent monthly income from line 14 of Furrent Monthly Income and Calcula					\$_		16,171.67
ch dis in a	ildren. The monthly ability payments fo	y necessary income you receive for y average of any child support paymen or a dependent child, reported in Part plicable nonbankruptcy law to the exte- ild.	its, foster care pa I of Form 122C-	ayments, or 1, that you rece	eived \$		0.00		'
em 11	nployer withheld fron	tirement deductions. The monthly to n wages as contributions for qualified plus all required repayments of loans 19).	retirement plans	, as specified in			0.00		
42. To	tal of all deduction	ns allowed under 11 U.S.C. § 707(b)(2)(A). Copy line	e 38 here =	=> \$	13,5	29.55		
and exp	d you have no reasc	al circumstances. If special circumstonable alternative, describe the special give your case trustee a detailed explar the expenses.	l circumstances	and their					1
Descri	be the special circ	cumstances	4	Amount of exp	ense				,
			\$						
			\$_						
			\$_						
			Total \$	0.00	Co _l	py re=> \$	0	0.00	
44. To	rtal adjustments. A	add lines 40 through 43		=>	\$	13,529.55	Copy here=		13,529.55
45. Ca	lculate your mont	hly disposable income under § 132	25(b)(2). Subtrac	ct line 44 from li	ne 39.		\$		2,642.12
Part 3:	Change in Inco	me or Expenses							
in t bai exa col	this form have chang nkruptcy petition and ample, if the wages lumn, enter line 2 in	r expenses. If the income in Form 12 ged or are virtually certain to change a d during the time your case will be opereported increased after you filed your the second column, explain why the v d fill in the amount of the increase.	after the date you en, fill in the infor r petition, check	filed your mation below. F 122C-1 in the fir	or				
Form	Line	Reason for change		Date of change	е	Increase or decrease?	Ame	ount of change	е
1220 1220 1220 1220 1220 1220 1220	C-2 C-1 C-2 C-1 C-2 C-1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$ _ \$ _		

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Debtor 1	Pizzuto, Michael	Case number (if known)	22-17639
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that t	he information on this statement and in any attachm	nents is true and correct.
X	/s/ Michael Pizzuto		
1	Michael Pizzuto		
	Signature of Debtor 1		
Date	October 18, 2022		
-	MM / DD / YYYY		

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Fill in this information to identify your case:					
Debtor 1	Michael Pizzuto				
Debtor 2 (Spouse, if filing)					
United States B	ankruptcy Court for the:	District of New Jersey, Newark Division			
Case number 22-17639					

Check as directed in lines 17 and 21:					
1	According to the calculations required by this Statement:				
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. §

					umn A tor 1	Colum Debto non-fil	
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ns (before all	\$	16,171.67	\$	0.00
Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	ents from a	a spouse if	\$	0.00	\$	0.00
Il amounts from any source which are regularly p f you or your dependents, including child suppor rom an unmarried partner, members of your household commates. Do not include payments from a spouse. sted on line 3	t. Includ d, your d	le regular ependents	contributions , parents, and	\$	0.00	\$	0.00
t income from operating a business, ofession, or farm	Debto	r 1					
ss receipts (before all deductions)	\$_	0.00					
inary and necessary operating expenses	-\$	0.00					
monthly income from a business, profession, or fa	arm \$	0.00	Copy here -> 3	\$	0.00	\$	0.00
income from rental and other real property	Debto						
ss receipts (before all deductions)	\$	0.00					
dinary and necessary operating expenses	-\$_	0.00					
	\$	0.00	Copy here -> 3	1	0.00	Ф	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period Case 22-17639-VFP Doc 10 Filed 10/18/22 Entered 10/18/22 10:49:50 Desc Main Document Page 40 of 44

Debtor 1	Pizzuto, Michael			Case number (if I	known) 22-176	39	
				Column A Debtor 1			
7. In t	terest, dividends, and royalties			\$).00 \$	0.00	
8. U r	nemployment compensation			\$	0.00 \$	0.00	
	o not enter the amount if you contend ocial Security Act. Instead, list it he	re:	a benefit under the				
	For you	\$	0.00				
	For your spouse	\$	0.00				
un ind Go a r 61 of	ension or retirement income. Do der the Social Security Act. Also, e clude any compensation, pension, povernment in connection with a disamember of the uniformed services. of title 10, then include that pay on retired pay to which you would other e 10 other than chapter 61 of that	xcept as stated in the next sent ay, annuity, or allowance paid b bility, combat-related injury or of If you received any retired pay p by to the extent that it does not rwise be entitled if retired unde	ence, do not by the United States disability, or death of baid under chapter exceed the amount		0.00\$	0.00	
Do as ter Sta de	come from all other sources not onot include any benefits received to a victim of a war crime, a crime agrorism; or compensation, pension, ates Government in connection with eath of a member of the uniformed sparate page and put the total below	under the Social Security Act; painst humanity, or international pay, annuity, or allowance paid a disability, combat-related injervices. If necessary, list other	or domestic by the United ury or disability, or				
				\$	0.00 \$	0.00	
				\$ (0.00 \$	0.00	
	Total amounts from separate	e pages, if any.	+	\$ (0.00 \$	0.00	
	alculate your total average mont ich column. Then add the total for Determine How to Measure		mn B. \$1	<u>6,171.67</u> +	\$	Total average monthly incompared to the second seco	e
12. C c	opy your total average monthly i	ncome from line 11.				\$16,171	.67_
13. C a	You are not married. Fill in 0 belong						
_			w				
_	You are married and your spous	• •	· ·				
_	Fill in the amount of the income	- ·	at was NOT regular	rly paid for the h	nusehold evnense	se of you or your de	nandant
	such as payment of the spouse's					oo or you or your do	poridoni
	Below, specify the basis for excl a separate page.	· ·	unt of income devote	ed to each purpo	se. If necessary, li	st additional adjustn	nents on
	If this adjustment does not apply	, enter 0 below.	•				
	-						
					_		
	Total		\$	0.00	Copy here=>		0.00
14. Y	our current monthly income. So	ubtract line 13 from line 12.				\$16,171	.67
15. C	Calculate your current monthly in	ncome for the year. Follow th	ese steps:				
	5a. Copy line 14 here=>	-				_{\$} 16,171	.67

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Debto	Pizzuto, Michael				Case number (<i>if known</i>) 22-17639				
		М	ultiply line 15a by 12 (the number of months in	n a year).		x 12			
	15	b. Ti	ne result is your current monthly income for the	year for this part of the	form	\$ 194,060.04			
16.	Cal	culate	the median family income that applies to y	ou. Follow these steps	:				
	16a.	. Fill ir	the state in which you live.	NJ					
	16b	. Fill ir	n the number of people in your household.	1					
	16c	To fi	n the median family income for your state and nd a list of applicable median income amount uctions for this form. This list may also be avail	s, go online using the li		\$75,321.00			
17.	Hov		he lines compare?						
	17a.	. 🗀	Line 15b is less than or equal to line 16c. 0 U.S.C. § 1325(b)(3). Go to Part 3. Do NO						
	17b		Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcr your current monthly income from line 14 at	ulation of Your Dispos					
Part	3:	Ca	Iculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)					
18.	Cop	у уо	ur total average monthly income from line 1	11.		\$16,171.67			
19.	that inco	calcu me, c	ne marital adjustment if it applies. If you are lating the commitment period under 11 U.S.C. opy the amount from line 13. E marital adjustment does not apply, fill in 0 or	§ 1325(b)(4) allows you		-s 0.00			
	ısa	. 11 1116	rmantai adjustinent does not appry, iii iii o or	Tille 19a.		- - 0.00			
	19b	. Subi	tract line 19a from line 18.			\$16,171.67_			
20.	Cald	culate	your current monthly income for the year.	. Follow these steps:					
	20a.	Cop	y line 19b			\$ <u>16,171.67</u>			
		Mult	iply by 12 (the number of months in a year).			x 12			
	20b	. The	result is your current monthly income for the ye	ar for this part of the for	rm	\$194,060.04_			
	20c.	. Cop	y the median family income for your state and s	ize of household from li	ne 16c	\$75,321.00_			
	21.	How	do the lines compare?						
			Line 20b is less than line 20c. Unless otherwis is 3 years. Go to Part 4.	se ordered by the court,	on the top of page 1 of this form, check	box 3, The commitment period			
			Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	ess otherwise ordered b	by the court, on the top of page 1 of this	form, check box 4, The			
Part	Bys	signing	gn Below g here, under penalty of perjury I declare that th hael Pizzuto	e information on this sta	atement and in any attachments is true a	and correct.			
^	Mi	chae	Pizzuto e of Debtor 1						
	•	Oc	tober 18, 2022						
	If yo		cked 17a, do NOT fill out or file Form 122C-2						
	-		cked 17b, fill out Form 122C-2 and file it with		that form, copy your current monthly in	ncome from line 14 above.			

Case 22-17639-VFP Doc 10 Filed 10/18/22 Entered 10/18/22 10:49:50 Desc Main Document Page 42 of 44 United States Bankruptcy Court District of New Jersey, Newark Division

IN RE:		Case No. 22-17639
Pizzuto, Michael		Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITO	R MATRIX
The above named debtor(s) hereb	by verify(ies) that the attached matrix listing	g creditors is true to the best of my(our) knowledge.
Date: October 18, 2022	Signature: /s/ Michael Pizzuto	
<u> </u>	Michael Pizzuto	Debtor
Date:	Signature:	
		Joint Debtor, if any

Borough of RIngwood 609 Margaret King Ave Ringwood, NJ 07456

Cavalry Portfolio Services 500 Summit Lake Dr Ste 400 Valhalla, NY 10595-2321

IRS - Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

IRS-Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

KML Law Group 216 Haddon Ave Ste 406 Westmont, NJ 08108-2812

Kohls/Capital One PO Box 3115 Milwaukee, WI 53201-3115

Macys/DSNB PO Box 8218 Mason, OH 45040-8218 Orange & Rockland Electric 390 W Route 59 Spring Valley, NY 10977-5320

PSE&G - Bankruptcy Dept. PO Box 709 Newark, NJ 07101-0709

PSE&G-Legal 80 Park Plz # T5D Newark, NJ 07102-4109

Shellpoint 55 Beattie Pl Ste 600 Greenville, SC 29601-2165

Shellpoint Mortgage Servicing PO Box 10826 Greenville, SC 29603-0826

Synchrony Bank c/o PRA Receivables Management LLC PO Box 41021 Norfolk, VA 23541-1021